



PURCHASE ORDER

PO Number PO000120

(Please quote this number on all related correspondence, delivery/shipping papers and invoice)

*ok 9/13
4/18 done w/ return receipt glass*

TO: AGUILAR AUTO WORKS A. Levi Mariano Avenue, Barangay Ususan Taguig City Contact Name: Roland Aguilar Tel No.: 781-1187 TIN:	DELIVER/SHIP TO: Bases Conversion and Development Authority 31st Street corner 2nd Avenue BGC 2F Bonifacio Technology Center Taguig NCR 1634 Contact Name: Tel No.: Fax No.: TIN: 002-219-694-000
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PO Date of Approval	PR No.	Requesting Department	Mode of Procurement	Date of Delivery	Delivery Term	Payment Term
3/9/2018 <i>3/13/18 yf</i>	0000013		SVP	3/8/2018	30 days	CREDIT 30
Item	Quantity	Unit	Description	Unit Cost	Amount	
1	1.00	LOT	SUPPLY OF LABOR AND MATERIALS- REPLACE OF QUARTER GLASS RIGHT SIDE, SEALANT AND TINT	20,000.00	20,000.00	
<i>HYUNDAI COASTER</i>						
2	1.00	LOT	SUPPLY OF LABOR AND MATERIALS- REPAINT WHOLE BODY, RUBDOWN SIMONIZE AND RUSTROOF, WASH OVER AND TINSMITH	150,000.00	150,000.00	

NOTE: GSD, FOR HYUNDAI COASTER WITH PLATE NO. SLA 136
 MODEL 2013
 ENGINE # D4DB531212
 CHASSIS # KMJHG17BPDCO59182
 PURCHASE REQUEST NO. 0000015

PESOS: ONE HUNDRED SEVENTY AND 00/100 PESOS ONLY **170,000.00**

Terms and Conditions:

This Purchase Order (PO) shall be governed by the General Terms and Conditions printed at the back hereof

Note: Please attach the original copy of this order together with the DELIVERY RECEIPT and SALES INVOICE in the triplicate.

FUNDS AVAILABLE:

DMIII Budget Department

HEDDA Y. RULONA

Approved by:

VP-CSG

BGEN CARLOS F. QUITA (RET)

Recommended by:

Manager, PPMD

I hereby certify that I am authorized representative of the company and that by affixing my signature, it shall bind the company I am representing to the terms and conditions of the PO and all applicable provisions of RA 9184 and its revised IRR and other applicable government rules.

I further certify that the above prices, which were quoted in the Request for Quotation (RFQ), are inclusive of all taxes, freight, insurance and all other incidental expenses necessary for its delivery.

CONFORME:

Emmanuel V. Aguilar

Date Received:

MARCH 19, 2018

Printed Name and Signature of Authorized Representative

(The supplier shall sign and return the acknowledgement copy to BCDA-Procurement or through fax within five (5) working days after issuance.)

KINDLY REFAX TO 5751785 OR EMAIL TO ifdavid@bcda.gov.ph THANKS.

